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Ego-Fragmentation-001-A, (EF-001-A)

Ego-fragmentation is the result of the inability to integrate successfully [traumatic] events into the whole of one's ego.

Trauma imposed by the intrusive procedures of abusive interrogations, and subsequent shame, humiliation, and goal-thwarting are often the cause of frustration-aggression reactions which escalate unresolved grievances.

This inability to integrate life experiences into one's conscious self, are known as dissociative disorders (schizokinesis) and often result in compulsive behaviors, and other attempts to avoid confronting feelings associated with [the] past trauma (a maladaptive response to stress); as it is constantly recreated, and remembered in daily life.

Long-term memory associated with survival learning-behavior, makes ignoring the perceived or actual harm posed by past life threatening events impossible for many, whom turn to drugs, alcohol and other distractions. This may ultimately lead to the inability of the subject to successfully cope with daily stressors, or rigors of independent living.

The subsequent search for meaning, as a result of loss of coherence (psychosocial crisis,) and attempts to cope can lead to obsessive behaviors, and symptoms of hyper-vigilance; (often described as paranoia, or psychosis; however these terms are medically vague, and offer an inaccurate, or incomplete, diagnosis.)

These symptoms are neither pre-existing, nor unique to particular individuals; however all persons are susceptible to stress, and have a 'breaking point', (equipotentiality.)

Community response, family, and environmental conditions do play a role in how severely a person may be impacted.

- D'Elia, John A., et al. "Psychosocial crisis in diabetic renal failure." *Diabetes Care* 4.1 (1981): 99-103.
["*Diabetic patients usually have many years to develop attitudes toward their future quality of life with an increased possibility of blindness, amputation, ischemic heart disease, and renal failure. These feelings plus those which rapidly emerge from family, friends, counselors, other patients, and members of the health care profession present infinite possibilities for frustration of the patient as prime decision maker.*"]
- Vogt, Dawne, et al. "Deployment risk and resilience inventory-2 (DRRI-2): An updated tool for assessing psychosocial risk and resilience factors among service members and veterans." *Journal of traumatic stress* 26.6 (2013): 710-717.
- Antonovsky, Aaron "Health, Stress, and Coping," San Francisco: Jossey-Bass Publishers, 1991.
- Marcia, James E. "Development and validation of ego-identity status." *Journal of personality and social psychology* 3.5 (1966): 551.

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